5.1 Malaria – facts and figures

The Disease

Malaria is caused by microscopic parasites which are transmitted from person to person by female anopheles mosquitoes. When an infective mosquito bites, she transmits malaria parasites to her victim who falls ill. Other mosquitoes then pick up the parasite from the infected person and continue spreading the disease when biting other people.

There are four types of human malaria – *Plasmodium falciparum, P.vivax, P.malariae,* and *P.ovale*. *P.falciparum* and *P.vivax* are the most common. *P.falciparum* is by far the most deadly type of malaria infection.

The first signs of malaria are usually fever, nausea, aching and headache. Untreated malaria can lead to severe anaemia, organ damage, convulsions, coma and death.

Figures

- An estimated one million people in Africa die from malaria each year, 90% of these deaths occurring in Sub-Saharan Africa.
- 71% of all deaths from malaria are in children under the age of 5. A child's most vulnerable period begins at six months, when the mother's protective immunity wears off and before the infant has established its own immune system. Pregnant women are also a high risk category.
- Malaria kills a child every 30 seconds.
- 300-500 million clinical cases of malaria are documented each year, worldwide.
- In all countries where malaria is found in Africa, 25-40% of all outpatient clinic visits are for malaria. In the same countries, between 20% and 50% of all hospital admissions are a consequence of malaria.
- More than 41% of the world's population is at risk of acquiring malaria, and the proportion increases yearly due to deteriorating health systems, growing drug and insecticide resistance, climate change and war.
- Malaria causes an average loss of 1.3% annual economic growth in countries with intense transmission. When added up over the years, this loss has lead to substantial differences in GDP between countries with and without malaria. Malaria traps families and communities in a downward spiral of poverty, disproportionately affecting marginalized populations and poor people who cannot afford treatment or who have limited access to health care.

Treatment and Resistance

Early diagnosis and prompt treatment are the basic elements of malaria control. Early and effective treatment of malaria disease will shorten its duration and prevent the development of complications and the great majority of deaths from malaria. Access to disease management should be seen not only as a component of malaria control but a fundamental right of all populations at risk.

Anti-malarial treatment policies will vary between countries depending on the way in which the disease is spread, transmission, patterns of drug resistance and political and economic contexts.

Resistance to chloroquine – the former treatment of choice – is now widespread in 80% of the 92 countries where malaria continues to be a major killer, while resistance to new second and third line drugs continues to grow.

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